Eill	in this information t	to identify your o	2000									
	btor 1											
I	btor 2 buse, if filing)											
Uni	ited States Bankrup	otcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA		_						
Case number 23-10778-mdc							Chec	ck if this is	:			
(If kr	nown)			-				An amende	ed filing			
										g postpetition		
0	fficial Form	1061					_	MM / DD/ \		g		
S	chedule I:	Your Inc	ome					VIIIVI 7 BB7			12/15	
spo atta	use. If you are sep ch a separate she rt 1: Describ	parated and you et to this form.	are married and not fili ir spouse is not filing w On the top of any additi	ith you, do not includ	de infor	mation	abou	t your sp	ouse. If me	ore space is	needed,	
1.	Fill in your empl information.	loyment		Debtor 1				Debtor	2 or non-fi	iling spouse		
	If you have more		Francisco and adatus	■ Employed				☐ Employed				
	attach a separate information abou		Employment status	☐ Not employed		☐ Not employed						
	employers.		Occupation	Senior Technicia								
	Include part-time, self-employed wo		Employer's name	State of New Jersey  Department of Treasury Trenton, NJ 08625								
	Occupation may or homemaker, if		Employer's address									
		How long employed there?						_				
Pai	rt 2: Give De	tails About Mor	nthly Income									
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to re	port for	any line	e, write	e \$0 in the	space. Ind	clude your no	n-filing	
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	ombine the information	for all	employe	ers for	that perso	on on the li	nes below. If	you need	
						F	or De	btor 1		btor 2 or ing spouse		
2.			ry, and commissions (b calculate what the monthl		2.	\$_	7	7,015.28	\$	N/A	-	
3.	Estimate and list monthly overtime pay.				3.	+\$		0.00	+\$	N/A	-	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	7 0	15 28	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	BENNESHA MCCOY	_	C	Case number (if known	1)	23-10	778-m	dc	
			_							
									•	
					For Debtor 1			ebtor	2 or pouse	
	Con	y line 4 here	4.		\$ 7,015.28	2	\$	illing 5	N/A	_
	OOP	y line 4 here	٦.		Ψ 7,013.20	_	Ψ		13/7	<u>.</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 1,713.83	3	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 446.33		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 704.17	_	\$		N/A	_
	5e.	Insurance	5e.		\$ 357.50	_	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ 0.00	_	\$		N/A	_
	5g.	Union dues	5g.		\$ 0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:	5h.		\$ 0.00	<u> </u>	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 3,221.83	3	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 3,793.45		\$		N/A	_
					Ψ <u>3,793.4</u> ξ	_	Ψ		IN/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business,								
	oa.	profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total	•			_	•			
	01	monthly net income.	8a.		\$ 0.00	_	\$		N/A	
	8b.	Interest and dividends	8b.	•	\$ 0.00	<u>)</u>	\$		N/A	<u>.                                    </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$ 0.00	)	\$		N/A	<u>.                                    </u>
	8d.	Unemployment compensation	8d.		\$ 0.00	)	\$		N/A	_
	8e.	Social Security	8e.		\$ 0.00	)	\$		N/A	<u>.                                    </u>
	8f.	Other government assistance that you regularly receive								
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental								
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	_ 8f.		\$0.00	)	\$		N/A	<u>.                                    </u>
	8g.	Pension or retirement income	8g.		\$0.00	_	\$		N/A	_
	8h.	Other monthly income. Specify:	8h.	.+	\$0.00	) -	+ \$		N/A	<u> </u>
0	A al al	all ather income. Add lines Co. Ob. Co. Od. Co. Of. Co. Ob	0	[	0.00		Φ.		N1/	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	_	\$		N/	A
			Г							
10.			10.	\$_	3,793.45 +	\$_		N/A	=   \$ _	3,793.45
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L							
11.		e all other regular contributions to the expenses that you list in Schedule								
		ide contributions from an unmarried partner, members of your household, your	depe	ende	ents, your roomma	tes	, and			
		r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	availa	able	to nav expenses l	liste	ed in Sc	hedule		
	Spe				to pay expenses.		00	11.		0.00
								1		
12.	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.									
		e that amount on the Summary of Schedules and Statistical Summary of Certai	n Liai	biliti	ies and Related <i>Da</i>	ata,	, if it	12.	\$	3,793.45
	appl	les								0,100110
									Combi	
13	Dov	you expect an increase or decrease within the year after you file this form	?						month	ly income
	<b>D</b> U ,	No.	•							
	_	Yes Explain:					-			